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GLENN PATENT GROUP 3475 EDISON WAY, SUITE L MENLO PARK, CA 94025				Certificate of Mailing or Transmission I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.			
				Jessica Pallach		(Depositor's name)	
				DM //		(Signature)	
				April 15/20	11	(Date)	
APPLICATION NO.	APPLICATION NO. FILING DATE		FIRST NAMED INVENTOR	ED INVENTOR ATTORNEY DOCKET NO		CONFIRMATION NO.	
10/055,594	01/22/2002		Roland E. Williams		ZICO0035	6960	
TITLE OF INVENTION: LANGUAGE MODULE AND METHOD FOR USE WITH TEXT PROCESSING DEVICES							
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APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE FEE	TOTAL FEE(S) DUE	DATE DUE	
nonprovisional	NO	\$1510	\$300	\$0	\$1810	04/25/2011	
EXAMINER		ART UNIT	CLASS-SUBCLASS]			
VO, HUYEN X 2626			704-001000				
 Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Custome Number is required. 			2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.				
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PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment. (A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY)							
ZI Corporation of Canada, Inc. Calgary, Canada							
Please check the appropriate assignee category or categories (will not be printed on the patent): 🔲 Individual 🚨 Corporation or other private group entity 🖵 Government							
	o small entity discount p	permitted)	4b. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above) ☐ A check is enclosed. ☐ Payment by credit card. Form PTO-2038 is attached. ☐ The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number _0.7-1445 (enclose an extra copy of this form).				
• •	SMALL ENTITY state	1s, See 37 CFR 1.27.		ger claiming SMALL EN			
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Authorized Signature							
	Michael A.		Registration No. 30,176				
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